



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of:

KAPIL, SANJAY et al.

Serial No. : 10/058,597

Filed: January 28, 2002

IDENTIFICATION AND APPLICATIONS
OF PORCINE REPRODUCTIVE AND
RESPIRATORY SYNDROME VIRUS
HOST SUSCEPTIBILITY FACTOR(S) FOR
IMPROVED SWINE BREEDING AND
DEVELOPMENT OF A NON-SIMIAN
RECOMBINANT CELL LINE FOR
PROPAGATION OF THE VIRUS AND A
TARGET FOR A NOVEL CLASS OF
ANTIVIRAL COMPOUNDS

Docket No. 30921-CIP1

Group Art Unit No. 1637

Examiner: TUNG, Joyce

Assistant Commissioner of Patents
Alexandria, VA 22313

Sir:


EXPRESS MAIL TRANSMITTAL

Transmitted herewith are: Amendment Transmittal Letter (1 pg); Petition For Extension of Time (1 pg); Amendment (23 pgs); Check in the amount of \$420.00 for 2 month Extension Fee; and return postcard.

EL993326846US

Date: February 20, 2004

Respectfully submitted,

By: 
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ATTORNEYS FOR APPLICANT(S)

AMENDMENT TRANSMITTAL LETTER (Large Entity)Applicant(s): **KAPIL, Sanjay and SHANMUKHAPPA, Kumar**

Docket No.

30921-CIPI

Serial No.

10/058,597

Filing Date

01/28/2002

Examiner

TUNG, Joyce

Group Art Unit

1637

Invention: IDENTIFICATION AND APPLICATIONS OF PORCINE REPRODUCTIVE AND RESPIRATORY SYNDROME VIRUS HOST SUSCEPTIBILITY FACTOR(S) FOR IMPROVED SWINE BREEDING AND DEVELOPMENT OF NON-
DIAN RECOMBINANT CELL LINE FOR PROPAGATION OF THE VIRUS AND A TARGET FOR A NOVEL CLASS OF
ANTIVIRAL COMPOUNDS

TO THE COMMISSIONER FOR PATENTS:

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED

	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	14 -	138 =	0 x	\$18.00	\$0.00
INDEP. CLAIMS	5 -	29 =	0 x	\$86.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$0.00

- ☒ No additional fee is required for amendment.
- ☐ Please charge Deposit Account No. _____ in the amount of _____
- ☐ A check in the amount of _____ to cover the filing fee is enclosed.
- ☒ The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. **19-0522**
- ☒ Any additional filing fees required under 37 C.F.R. 1.16.
- ☒ Any patent application processing fees under 37 CFR 1.17.

Tracey S. Truitt
Signature

Dated: FEBRUARY 20, 2004

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I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37C.F.R. 1.8 and is addressed to the _____ for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Signature of Person Mailing Correspondence

Typed or Printed Name of Person Mailing Correspondence

CC:



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MAIL STOP: FEE AMENDMENTS

Commissioner for Patents

Alexandria, VA 22313-1450

Sir:

AMENDMENT

In response to the Office Action dated December 3, 2003, amendment and reconsideration of the above application is requested.

Amendments to the claims begin on page 2 of this paper.

Remarks/Arguments begin on page 23 of this paper.